

**Finance & Administration Cabinet
Division of State Risk & Insurance Services
Property Claims Section
209 St. Clair, 5th Floor
Frankfort, Kentucky 40601**

Website: <http://finance.ky.gov/offices/controller/Pages/dsris.aspx>

To: All State Agencies & State Universities

**From: State Risk & Insurance Services/Claims Section
 Evelyn Smith, Claims Program Manager
 T.J. O'nan, Claims Program Coordinator**

**Re: Fire & Tornado Fund Policy Year: 7/1/2015 – 6/30/2016
 Property Damage Insurance Claims Packet**

Please review all this information carefully; and contact us if you have any questions or concerns.

We are a team responsible for providing the best possible claims service for the Commonwealth of Kentucky State Agencies & State Universities. We can achieve that only with your help in reporting claims within 30 days and forwarding any/all details and pictures about the claim as soon as you know.

In this Claims Packet, you will find the following:

- ***Policy Changes effective July 1, 2015***
- ***Property Claims Contact form***
- ***Insurance Deductibles and Claim Reporting Instructions***
- ***Lightning Affidavit***

Also, please go to our website and scroll down to the bottom of the screen to find

- The **Notice of Loss** claim form SRC-10, which can be completed and emailed to us "on-line" for immediate submission of a known claim; and
- The **Fire & Tornado Fund policy**, which includes on page 1, the *State Risk & Insurance Staff Directory* with phone numbers and email addresses.

Thank you in advance for your time to review this information; and always feel free to contact us if you have any questions, concerns or comments.

Commonwealth of Kentucky STATE FIRE & TORNADO FUND Self-Insured All-Risk Property Policy

Material Policy Coverage Changes **Policy Year: July 1, 2015 – June 30, 2016**

1. Building & Personal Property Section

a. Section F. Limits of Insurance

For loss or damage to outdoor signs attached to a building, the maximum amount payable will be increased to \$5,000.

b. Section G. Deductible

When the cause of loss is due to “frozen water pipes”, a \$2,500 deductible will be required.

c. Section H. 3. “Duties in the event of a Loss or damage”

Notice of Loss for all property damage claims, must be reported within 30 days from the date of the loss; otherwise, a \$2,500 deductible may be applied.

d. Section H.6. Loss Conditions (Vacancy)

If a loss occurs at a building (except buildings used for “student housing”) which has been vacant for more than 120 consecutive days prior to the loss:

- *F&T will pay a maximum amount of 50% of the Actual Cash Value (ACV); and*
- *Any premium adjustment will be made effective on the day before the covered loss occurred, through the end of the policy year.*

Fire & Tornado Fund Policy Property Claims Contact Person

**Be sure to notify everyone at each insured location with this contact information,
in the event of property damage claims.**

Please complete the following information and return to Evelyn Smith, Claims Program Manager:

- Scan & E-Mail: evelyn.smith@ky.gov

Claims Contact Person: _____

E-mail address: _____ Phone: (____) _____

Street Address: _____ City _____, Zip _____

State Agency/University Name: _____

Insurance Certificate # _____ Certificate for: _____

Cabinet: _____ Department: _____ Division: _____

Date Completed: _____ Completed by: _____

As one of our insured, you have specific responsibilities explained in the policy paragraph "Duties in the Event of Loss or Damage" as well as the following:

- *If damages involve vandalism or theft, notify the police immediately.*
- *Within 30 days from the date of loss, you are required to complete and submit the Notice of Loss, giving any/all details with an estimated amount of the damages.*
- *Take all reasonable steps to protect the Covered Property from further damage; and communicate with your contact at each location to confirm damages and estimate an amount.*
- *If feasible, set the damaged property aside and in the best possible order for examination in future, if deemed necessary. Photos of damages are appreciated.*
- *Your required Procurement Procedures are expected to be followed, unless approved otherwise within your Cabinet.*
- *Cooperate with us in the investigation, assessment and settlement of the claim. If the potential for any claim appears that it may be major or involve various complications, call Evelyn Smith at 502-782-5433.*

Claim Reporting Instructions Fire & Tornado Fund July 1, 2015 – June 30, 2016

Your insurance policy deductibles shown below are the agency's responsibility, which will be deducted from the total amount of the settlement. In "one occurrence", only one deductible (the highest deductible amount of damaged items) will apply.

NOTE: Effective 7/1/2015, if a Notice of Loss is completed and submitted more than 30 days following the date of loss, a \$2,500 deductible may apply to the claim.

Type of Claim

Deductible Amount

- Building/Contents \$ 1,000
 - If "Frozen water pipes" are the cause of loss, a \$2,500 deductible will apply.
- Inland Marine (including laptops) \$ 500
- Telephone Systems \$ 1,000
- EDP Computer Equipment \$ 1,000
- Business Income/Extra Expense \$ 1,000

1. Report all property damages to the "Claims Contact" person for your Agency/University; and that person should immediately complete Sections 1, 2, 3 of the **Notice of Loss** form. Be sure to include the certificate number and property ID. The Claims Contact person must sign and date the Notice of Loss form for it to be processed.
2. **For damage caused by theft, vandalism, or other crime**, a copy of the police report is required.
3. **Complete and submit the Notice of Loss form** with any supporting documentation or pictures.
4. **Obtain itemized repair estimates or replacement quotes** for "like kind and quality", if available.
5. **Invoices and/or receipts are required for final settlement payment of the claim.**
6. **When damages occur to required scheduled items (i.e. Mobile Equipment, Fine Arts, and Inland Marine)**, submit proof that State Risk Underwriting Section was notified prior to the claim.
7. **For damage caused by lightning**, have the repair person or vendor who examined the equipment will need to complete the "Lightning Loss Verification" form and submit that to your "Claims Contact" person..

State Risk Claims Section will assign a claim number to each new claim, which will be sent to the "Claims Contact" person. This claim number should be referenced on all correspondence and documents to ensure proper matching with the correct claim file. We will monitor pending claims and follow up with the "Claims Contact" person to get an updated status report on the progress of the necessary repairs and/or replacement of damages; and to assist in any way possible.

**Fire & Tornado Fund Insurance Claims
LIGHTNING DAMAGE VERIFICATION AFFIDAVIT**

DATE:_____

To Whom It May Concern:

I inspected/repaired (Item damaged) _____

Model Number_____ Serial Number_____ Year Model_____

Date of Original Purchase_____ Purchase Price_____ Size_____

Place Purchased_____

Owned by (name of insured)_____

Address_____

Date of Loss_____ Time of Loss_____

Are damaged item(s) available for inspection?_____ If yes, where_____

If it is not available for inspection, why not?_____

This damage was solely due to lightning and no other cause whatsoever because _____

Repairer's Name_____

Company Name_____

Company Address_____

Phone Number _____